UTI	LITY PATENT APPLICATION
99	TRANSMITTAL

Attorney Docket No. First Named Inventor

Jacewicz et al.

(For new nonprovisional applications under 37 CFR 1.53(b))

"EXPRESS	MAIL	CERTIF	ICATE''

PRESS MAIL" MAILING LABEL NUMBER EL964437495US DATE OF DEPOSIT: January 7, 2004

I Her by certify that this paper or fee and the papers indicated as being transmitted herewith are being deposited with the United States Postal Service
"Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date and with the Mailing Label Number indicated above and addressed to: Commissioner for Patents, Mail Stop: Patent Application, Alexandria, VA 22313-1450. NAME OF PERSON MAILING PAPER OR FEE

(TYPE OR PRINT)

APPLICATION ELEMENTS			The Title of the Invention:		
See MPEP chapter 600 concerning utility patent application contents.			Paroxetine Maleate		
1. 🛛	The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. 19-2570 General Authorization to charge any and all fees under 37 CFR 1.16 or 1.17, including petitions for extensions of time, relating to this application. (37 CFR 1.136(a)(3)) (Submit an original, and a duplicate for fee processing)	8. 🔲	Nucleotide and/or Amino Acid Sequence Submission a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies d. Use the identical computer-readable form filed in Application No, filed as the computer-readable form for the instant application. (37 CFR 1.821(e))		
2.	The total fee is calculated as shown below:		ACCOMPANYING APPLICATION PARTS		
	Basic Filing fee \$770.00	9.	a. Information Disclosure Statement (IDS)		
	Total Claims 20 - 20 = 0 x \$18 \$ 0.00 Independent Claims 8 -3 = 5 x \$86 \$470.00		b. PTO-1449		
	Independent Claims 8 -3 = 5 x \$86 \$470.00 Multiple Dependent Claim present. \$290		c. Copies of all IDS Citations		
	TOTAL ELLING FEE	10. 🔲	Assignment Papers (cover sheet & document(s))		
	Second in this application original plains 1 to 15 of the prior	11.			
	Cancel in this application original claims <u>1</u> to <u>15</u> of the prior application before calculating the filing fee.	11.	Prior Application is Assigned to: SmithKline Beecham plc		
	application before calculating the filling fee.		(for continuation/divisional with Box 17a completed		
\boxtimes	Charge \$1,240.00 to the above indicated Deposit Account.		. Use communication with some transcent		
3a. 🛛	Specification excluding Drawings [Total Pages] 18	12. 🛛	Preliminary Amendment [Total Pages] 5		
3ъ. 🛛	Abstract on a separate sheet [Total Pages] 1				
4.	Drawing(s) (35 USC 113) [Total Sheets]	13. 🛭	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
5.	Declaration and Power of Attorney [Total Pages] 3	14.	Certified Copy of Priority Document(s)		
	a. Newly executed (original or copy)		(if foreign priority is claimed)		
b. Copy from a prior application (37 CFR 1.63(d))		🔽			
(for continuation/divisional with Box 17a completed)		15. 🛛	Transfer all references cited by Applicants or by the		
c. Unsigned Declaration [Note Box 6 below]			Examiner from the parent Application Serial No. 10/174,237 filed June 17, 2002. A PTO-1449 listing		
i. DELETION OF INVENTOR(S)			the references is enclosed.		
	Signed statement attached deleting inventor(s) named in the	16. 🔲	Other:		
	prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	<u> </u>			
6. 🖾 🖰	Incorporation By Reference (useable if Box 5b is checked)				
	The entire disclosure of the prior application, from which a copy of				
	being part of the disclosure of the accompanying application and is	nereby in	corporated by reference therein.		
17.	Priority Information, check appropriate box and supply the requis	site informa	tion		
a:	The accompanying application is a	_	sional Continuation-in-part (CIP)		
ļ	of prior application No: 10/174,2				
b	b. Benefit is claimed under Title 35, United States Code, Section 119(e) of the following Provisional Applications: Application No. filed .				
c.	*Add priority information via Preliminary Amendment				
Corner	ordenes CLAVOOMERIUM DE		P (C 11 C 1 1 1 1 1		
Correspo		Signature	Respectfully Submitted,		
	Corporate Interfectual Property - 0 w 2220	Name	Mario Orina		
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reseptions	e (610) 270-5023 Fax (610) 270-5090 ·	Registrati No.	33,870		
<u> </u>			33,070		